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POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO

I hereb	by appoint:		\	
X P	ractitioners associated with the Customer Number:	24737		
OR				
	Practitioner(s) named below (if more than ten patent practitioners are to be named; then a customer number must be used):			
l F	Name	7	Registration	n Number
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as attome	ey(s) or agent(s) to represent the undersigned before the Unit	ted States Patent an	id Trademark O	office (LISPTO) in connection with
	all patent applications assigned only to the undersigned according to this form in accordance with 37 CFR 3.73(b).	rding to the USPTO	assignment rec	cords or assignment documents
Assignee Name and Address:				
KO	Koninklijke Philips Electronics N.V.			
	oenewoudseweg 1	1		
20	21 BA Eindhoven, The Netherlands	<i>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</i>		
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	And a second conveyor of the c	}		
A copy	A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b)			
require	u to be inled in each application in which this f	orm is used T	'ha etatamai	nt under 27 CED 2 72/6\
authoriz	completed by one of the practitioners appoint zed to act on behalf of the assignee, and must	led in this torm	if the appo	inted practitioner is
Attorne	y isto be filed.	lidentity the ap	piication in	which this Power of
SIGNATURE of Assignee of Record				
The individual whose signature and title is supplied below is authorized to act on behalf of the assignee				
Name Signature	Matthieu van Kary			
Title			Date	Amil 69 2004
Tiue	Authorized Representative		Telephone	(914) 333-9600

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete his form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER

PHNL020544 US

As a below named inventor, I hereby declare that:				
My residence, post office address and citizenship are as stated next to my name. 20/5 17924				
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: "Method for authentication between devices" the specification of which (check only one item below):				
is attached hereto.				
was filed as United States a	application			
Serial No			Marie de La Company de	
on -		 .		
and was amended				
on				
▼ was filed as BCT internation	and application			
Wumber PCT/IB03/02340	• •			
Number <u>FC1/1B03/02340</u> 27 May 2003				
on ————————————————————————————————————				
and was amended under PCT Article 19				
on (if applicable).				
	(ii applicable).			
I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.				
I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).				
I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent				
or inventor's certificate or of any PCT international application(s) designating at least one country other than the United				
States of America listed below and have identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me				
on the same subject matter having a filing date before that of the application(s) of which priority is claimed:				
PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:				
COUNTRY	APPLICATION NUMBER	DATE OF FILING	PRIORITY	
		DAY, MONTH, YEAR	CLAIMED UNDER 35 USC 119	
Europe	02077423.8	17 June 2002	YES	
<u> </u>				

1	Combined Declaration For Patent Application and Power of Attorney (Continued) (includes Reference to PCT International Applications)			Attorneys Docket Numb	IS			
	POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)							
	Micha	ack E. Haken, Reg. No. 26,902 Michael E. Marion, Reg. No. 32,266 Edward M. Blocker, Reg. No. 30,245			Direct Telephone Calls to: (name and telephone number (914)332-0222		phone number) 222	
O.		FULL NAME OF INVENTOR	FAMILY NAME LENOIR	L	FIRST GIVEN NAME Petrus	-	SECOND GIVEN NAME Johannes	
	201	RESIDENCE & CITIZENSHIP	Eindhoven \	NLX	STATE OR FOREIGN COUI The Netherlands	NTRY	COUNTRY OF CITIZENSH The Netherlands	IP
		POST OFFICE ADDRESS	POST OFFICE-ABOR Prof. Holstlaa		5656 AA Eindhove	en	STATE & ZIP CODE/COUNTIES Netherlands	NTRY
E	1	FULL NAME OF INVENTOR	FAMILY NAME TALSTRA		FIRST GIVEN NAME Johan	-	SECOND GIVEN NAME Gornelis	
	202	RESIDENCE & CITIZENSHIP		NLX	STATE OR FOREIGN COULT The Netherlands	NTRY	COUNTRY OF CITIZENSH The Netherlands	IP
		POST OFFICE ADDRESS	POST OFFICE ADDR Prof. Holstlaa		5656 AA Eindhove	en	STATE & ZIP CODE/COUNTIES Netherlands	ITRY
W.		FULL NAME OF INVENTOR	VAN DEN HEU	JVEL\ <	FIRST GIVEN NAME Sebastiaan		SECOND GIVEN NAME Antonius Fransis Arnoldus	cus
	203	RESIDENCE & CITIZENSHIP	Eindhoven	NCX	STATE OR FOREIGN COUR The Netherlands	NTRY	COUNTRY OF CITIZENSH The Netherlands	
		POST OFFICE ADDRESS	POST OFFICE ADDRESS Prof. Holstlaan 6		5656 AA Eindhoven		STATE & ZIP CODE/COUNTIES Netherlands	ITRY
\mathscr{C}	: : : :	FULL NAME OF INVENTOR	FAMILY NAME STARING		FIRST GIVEN NAME Antonius		SECOND GIVEN NAME Adriaan Maria	
	204	RESIDENCE & CITIZENSHIP	Eindhoven	XXX	STATE OR FOREIGN COUI The Netherlands	NTRY	COUNTRY OF CITIZENSH The Netherlands	
		POST OFFICE ADDRESS	POST OFFICE ADDR Prof. Holstlaa		5656 AA Eindhove	en	STATE & ZIP CODE/COUNTIES Netherlands	ITRY
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true: and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 if Title 18 of the United states Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.								
	SIGNATURE OF INVENTOR 201 SIGNATURE OF I			INVENTOR 202 SIGNAT		JRE OF INVENTOR 203		
	DATE	12 January ;		DATE 30 Janu	ary 2004	DATE	2 January 2004	
ļ	SIGNA	ATURE OF INVENTO						

U.S. DEPARTMENT OF COMMERCE- Patent and Trademarks Office

(July 1994)

DATE

12 January 2004



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STATEMENT UNDER 37 CFR 3.73(b)			
Applicant/Patent Owner: Koninklijke Philips Electronics N.V.			
Application No./Patent No.: Concurrently	Filed/Issue Date: Concurrently		
Entitled: METHOD FOR AUTHENTICATION BETWEE	N DEVICES		
Koninklijke Philips Electronics N.V. (Name of Assignee)	, a <u>corporation</u> (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)		
states that it is: 1. the assignee of the entire right, title, and interest	est; or		
2. an assignee of less than the entire right, title and interest. The extent (by percentage) of its ownership interest is ——————————————————————————————————			
A. [] An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel, Frame, or for which a copy thereof is attached.			
OR			
B. [] A chain of title from the inventor(s), of the pater below:	nt application/patent identified above, to the current assignee as shown		
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	ted States Patent and Trademark Office at, or for which a copy thereof is attached.		
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[] Additional documents in the chain of titl	e are listed on a supplemental sheet.		
	nment document or a true copy of the original document) cordance with 37 CFR Part 3, if the assignment is to be		
The undersigned (whose title is supplied below) is au	•		
	Michael E. Belk, Reg. 33,357		
Date _(914) 333-9643	Typed or printed name Muhael Lile		
Telephone number	Signature		
	Corporate Counsel Title		

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